

ASSEMBLY HEALTH AND SENIOR SERVICES COMMITTEE

STATEMENT TO

ASSEMBLY COMMITTEE SUBSTITUTE FOR ASSEMBLY, No. 3028

STATE OF NEW JERSEY

DATED: JANUARY 18, 2007

The Assembly Health and Senior Services Committee reports favorably an Assembly Committee Substitute for Assembly Bill No. 3028.

This committee substitute, which is designated as the "Safe Patient Handling Act," requires general and special hospitals, nursing homes, State developmental centers, and State and county psychiatric hospitals to establish a safe patient handling program to reduce the risk of injury to both patients and health care workers at the facility.

The substitute provides specifically as follows:

- A covered facility is required to: establish a safe patient handling program within 36 months of enactment of the substitute; maintain a detailed written description of the program and its components; provide a copy of the written description to the Department of Health and Senior Services or Department of Human Services, as applicable; and make the description available to health care workers at the facility and to any collective bargaining agent representing health care workers at the facility.
- The facility is also required to: establish a safe patient handling policy; include in the policy a statement concerning the right of a patient to refuse the use of assisted patient handling; post its safe patient handling policy in a location easily visible to staff, patients, and visitors; and designate a representative of management at the facility to be responsible for overseeing all aspects of the safe patient handling program.
- The substitute defines "assisted patient handling" to mean patient handling using: mechanical patient handling equipment, including, but not limited to, electric beds, portable base and ceiling track-mounted full body sling lifts, stand assist lifts, and mechanized lateral transfer aids; and patient handling aids, including, but not limited to, gait belts with handles, sliding boards and surface friction-reducing devices.
- The substitute requires a safe patient handling program to include:
 - a safe patient handling policy on all units and for all shifts that minimizes unassisted patient handling, taking into account the

patient's physical and cognitive condition, and that is consistent with patient safety and well-being;

-- an assessment of the safe patient handling assistive devices needed to carry out the safe patient handling policy;

-- recommendations for a three-year capital plan to purchase safe patient handling equipment and patient handling aids necessary to carry out the safe patient handling policy, which policy is to take into account the financial constraints of the facility;

-- protocols and procedures for assessing and updating the appropriate patient handling requirements of each patient of the facility;

-- a plan for achieving prompt access to and availability of mechanical patient handling equipment and patient handling aids;

-- a provision requiring that all such equipment and aids be stored and maintained in compliance with their manufacturers' recommendations;

-- a training program for health care workers, as specified in the substitute; and

-- educational materials for patients and their families to help orient them to the safe patient handling program at the facility.

- The facility is to conduct an annual evaluation of the program, and make revisions to the program based on data analysis.

- The facility is to conduct the initial training within 36 months of enactment of the substitute.

- The substitute stipulates that nothing contained therein is to be construed to limit the right of a patient to refuse the use of assisted patient handling.

- The facility is further required to establish a safe patient handling committee within 12 months of enactment of the substitute, to be responsible for all aspects of the development, implementation and periodic evaluation and revision of the safe patient handling program at the facility, including the evaluation and selection of patient handling equipment and aids and other appropriate engineering controls.

-- In the case of a health care system that owns or operates more than one covered health care facility or Department of Human Services facilities, the safe patient handling committee may be operated at the system or department level, provided that the committee members include at least one health care worker from each facility and a safe patient handling program is developed for each facility, taking into account the characteristics of the patients at the facility.

-- At least one-half of the committee members are to be health care workers (whose job duties entail patient handling), who are representative of the different disciplines of health care workers employed at the facility. In a facility where health care workers are represented by one or more collective bargaining agents, the management of the facility is to consult with the collective bargaining agents regarding the selection of health care worker committee members.

-- The remaining committee members are to have experience, expertise, or responsibility relevant to the operation of a safe patient handling program.

- The facility is prohibited from taking retaliatory action against any health care worker because that worker refuses to perform a patient handling task due to a reasonable concern about worker or patient safety, or the lack of appropriate and available patient handling equipment or aids. If a health care worker refuses to perform a patient handling task, the worker is required to notify his supervisor of the refusal and the reason for the refusal.
- Finally, a facility that is in violation of the provisions of the substitute is subject to such penalties as the Department of Health and Senior Services may determine pursuant to sections 13 and 14 of P.L.1971, c.136 (C.26:2H-13 and 26:2H-14).

This substitute is identical to Senate Bill No. 1758 (1R) (Vitale/Weinberg), which is pending in the Senate Budget and Appropriations Committee.